

2019 TEAM COMPETITION - REGISTRATION FORM - INDIVIDUAL OR TEAM

NAME OF ATTENDEE	E-mail address

TEAM NAME (If no team entry, put "ad-hoc") _____

TEAM LEADER: (name) (if applicable) _____

(TL e-mail) _____

Names of Additional Attendees/Participants (teams are limited to 10 participants)

NAME OF ATTENDEE	E-mail address

Will this team need a WSHNA supplied communication system (throw-phone or communication kit)? _____

Each team must contribute two experienced team members to the judging/role playing pool. List below the information for your team's two contributors. They do not need to be current team members, but they must have the experience (at least two years) to allow them to fairly judge or role play. If you are able to provide more than two, that would be very helpful.

NAME OF JUDGE/ROLE PLAYER	E-mail address	Yrs. of Negotiation Experience	Judge or Role Player?

**YOU MUST BE A REGISTERED SEMINAR ATTENDEE TO PARTICIPATE IN THE HNT COMPETITION
SEND COMPLETED FORM TO TROY KING, Troy.King@portlandoregon.gov**